FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



SEC USE ONLY

UNIFORM LIMITED OFFERING EXEMPTION						Serial	
						RECEIVED	
1212120							
	1513	621					
Oak Hill Capital Partners II		as changed, and indic	cate chang	ge.)			
Filing Under (Check box(es) to Type of Filing: New F		Rule 505	⊠ Ru	le 506 S	Section 4(6)	ULOE	
	A. BASIC	IDENTIFICATIO	N DATA		And the second		
1. Enter the information requ							
Name of Issuer (check Oak Hill Capital Partners II	t if this is an amendment and name had, L.P.	as changed, and indic	cate chang	11		CS RECT	
Address of Executive Offices 201 Main Street, Suite 2415,		Street, City, State, Zi	p Code)	Telephone Nun 817-390-8500	íber (Including	Área Code)	
Address of Principal Business (if different from Executive O		Street, City, State, Zi	p Code)	Telephone Num	mber (Including Area Code)		
Brief Description of Business						<u></u>	
Investment Fund				_			
Type of Business Organization corporation business trust	n Imited partnership, already form Imited partnership, to be formed			other (please	e specify):		
		Month Year			14:	A second second	
Actual or Estimated Date of In	ncorporation or Organization:	9-04 ⊠ Act	ual	Estimate	ed JA)	¥ 10 2005 Å.	
Jurisdiction of Incorporation of	or Organization: (Enter two-letter U	.S. Postal Service ab I for other foreign jur			¬ .	(CARCO)	
GENERAL INSTRUCTION		Tor other foreign jui	i isaiction)			I Carlo	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).							
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.							
*	es and Exchange Commission, Attn:				n, D.C. 20549.		
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be							
photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes							
thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix							
need not be filed with the SEC. Filing Fee: There is no federal filing fee.							
State:							
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted							
ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany							
this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.							
ATTENTION							
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the							
appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.							

Persons who respond to the collection of information contained in this form are not SEC 1972 (6-02) required to respond unless the form displays a currently valid OMB control number.

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## 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) OHCP GenPar II, L.P. (Number and Street, City, State, Zip Code) Business or Residence Address 201 Main Street, Suite 2415, Fort Worth, Texas 76102 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) **OHCP MGP II, LLC** Business or Residence Address (Number and Street, City, State, Zip Code) 201 Main Street, Suite 2415, Fort Worth, Texas 76102 □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Crandall, J. Taylor (Number and Street, City, State, Zip Code) Business or Residence Address c/o Oak Hill Capital Management, LLC, 65 East 55th Street, 36th Floor, New York, NY 10022 □ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Gruber, Steven B. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Oak Hill Capital Management, LLC, 65 East 55th Street, 36th Floor, New York, NY 10022 Director Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Nathanson, Andrew J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Oak Hill Capital Management, LLC, 65 East 55th Street, 36th Floor, New York, NY 10022 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Nayden, Denis J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Oak Hill Capital Management, LLC, 65 East 55th Street, 36th Floor, New York, NY 10022 □ Promoter Beneficial Owner ☐ Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Wolfson, Mark A. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Oak Hill Capital Management, LLC, 65 East 55th Street, 36th Floor, New York, NY 10022 (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA

| - N.,                                                                                                                         | April 1980                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 14/11/11/11                  | . <u> </u>                   | В.                           | . INFORM                     | ATION AB                     | OUT OFFI                     | ERING                        |                                        |                              |                              |                              |
|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|------------------------------|------------------------------|
| 1. H                                                                                                                          | as the issuer so                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                              | the issuer int               |                              |                              |                              |                              | ffering?                     |                                        | •••••                        |                              | Yes No                       |
| (which the General Partner may waive in its sole dis                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              |                              |                              |                              |                              |                              |                              |                                        |                              |                              |                              |
| 3. D                                                                                                                          | oes the offerin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | g permit joi                 | nt ownership                 | of a single                  | unit?                        |                              |                              |                              | ••••••                                 |                              |                              | Yes No □                     |
| re<br>p<br>th                                                                                                                 | 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. |                              |                              |                              |                              |                              |                              |                              |                                        |                              |                              |                              |
| Full N                                                                                                                        | Name (Last nar                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ne first, if in              | idividual)                   |                              |                              |                              |                              |                              |                                        |                              |                              |                              |
| Credi                                                                                                                         | it Suisse First                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Boston LL                    | С                            |                              |                              |                              |                              |                              |                                        |                              |                              |                              |
| Business or Residence Address (Number and Street, City, State, Zip Code)  Eleven Madison Avenue, New York, NY 10010-3629      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              |                              |                              |                              |                              |                              |                              |                                        |                              |                              |                              |
|                                                                                                                               | e of Associated                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              |                              |                              |                              |                              |                              | ·                            |                                        |                              |                              |                              |
|                                                                                                                               | s in Which Per<br>Check "All Stat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |                              |                              |                              |                              |                              | ••••••                       | ······································ | •••••                        |                              |                              |
| [AL]<br>[IL]<br>[MT]<br>[RI]                                                                                                  | [AK]<br>[IN]<br>[NE]<br>[SC]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | [AZ]<br>[IA]<br>[NV]<br>[SD] | [AR]<br>[KS]<br>[NH]<br>[TN] | [CA]<br>[KY]<br>[NJ]<br>[TX] | [CO]<br>[LA]<br>[NM]<br>[UT] | [CT]<br>[ME]<br>[NY]<br>[VT] | [DE]<br>[MD]<br>[NC]<br>[VA] | [DC]<br>[MA]<br>[ND]<br>[WA] | [FL]<br>[MI]<br>[OH]<br>[WV]           | [GA]<br>[MN]<br>[OK]<br>[WI] | [HI]<br>[MS]<br>[OR]<br>[WY] | [ID]<br>[MO]<br>[PA]<br>[PR] |
| Full N                                                                                                                        | Name (Last nar                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ne first, if in              | dividual)                    | ·                            |                              |                              | <del>.</del>                 |                              |                                        |                              | ·                            |                              |
| Busin                                                                                                                         | ess of Residen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ce Address                   | (Number and                  | d Street, City               | y, State, Zip                | Code)                        | ,                            |                              |                                        |                              |                              |                              |
| Name                                                                                                                          | of Associated                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Broker or I                  | Dealer                       |                              |                              |                              |                              |                              | -                                      |                              |                              |                              |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              |                              |                              |                              |                              |                              |                              |                                        |                              |                              |                              |
| [AL]<br>[IL]<br>[MT]<br>[RI]                                                                                                  | [AK]<br>[IN]<br>[NE]<br>[SC]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | [AZ]<br>[IA]<br>[NV]<br>[SD] | [AR]<br>[KS]<br>[NH]<br>[TN] | [CA]<br>[KY]<br>[NJ]<br>[TX] | [CO]<br>[LA]<br>[NM]<br>[UT] | [CT]<br>[ME]<br>[NY]<br>[VT] | [DE]<br>[MD]<br>[NC]<br>[VA] | [DC]<br>[MA]<br>[ND]<br>[WA] | [FL]<br>[MI]<br>[OH]<br>[WV]           | [GA]<br>[MN]<br>[OK]<br>[WI] | [HI]<br>[MS]<br>[OR]<br>[WY] | [ID]<br>[MO]<br>[PA]<br>[PR] |
| Full N                                                                                                                        | Vame (Last nar                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ne first, if in              | dividual)                    |                              |                              | _                            |                              |                              | -                                      |                              |                              |                              |
| Business of Residence Address (Number and Street, City, State, Zip Code)                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              |                              |                              |                              |                              |                              |                              |                                        |                              |                              |                              |
| Name of Associated Broker or Dealer                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              |                              |                              |                              |                              |                              |                              |                                        |                              |                              |                              |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              |                              |                              |                              |                              |                              |                              |                                        |                              |                              |                              |
| [AL]<br>[IL]<br>[MT]<br>[RI]                                                                                                  | [AK]<br>[IN]<br>[NE]<br>[SC]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | [AZ]<br>[IA]<br>[NV]<br>[SD] | [AR]<br>[KS]<br>[NH]<br>[TN] | [CA]<br>[KY]<br>[NJ]<br>[TX] | [CO]<br>[LA]<br>[NM]<br>[UT] | [CT]<br>[ME]<br>[NY]<br>[VT] | [DE]<br>[MD]<br>[NC]<br>[VA] | [DC]<br>[MA]<br>[ND]<br>[WA] | [FL]<br>[MI]<br>[OH]<br>[WV]           | [GA]<br>[MN]<br>[OK]<br>[WI] | [HI]<br>[MS]<br>[OR]<br>[WY] | [ID]<br>[MO]<br>[PA]<br>[PR] |

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.                                                                                             |                               |                                            |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------------------|
|    | Type of Security                                                                                                                                                                                                                                                                                                                                                                                                                     | Aggregate<br>Offering Price   | Amount Already<br>Sold                     |
|    | Debt                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$                            | \$                                         |
|    | Equity                                                                                                                                                                                                                                                                                                                                                                                                                               | \$                            |                                            |
|    | ☐ Common ☐ Preferred                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>5</b>                      | . Þ <u> </u>                               |
|    | Convertible Securities (including warrants)                                                                                                                                                                                                                                                                                                                                                                                          | \$                            | \$                                         |
|    | Partnership Interests                                                                                                                                                                                                                                                                                                                                                                                                                | Ψ1                            |                                            |
|    | Other (Specify)                                                                                                                                                                                                                                                                                                                                                                                                                      | \$ 2,500,000,000 <sup>1</sup> |                                            |
|    | Total                                                                                                                                                                                                                                                                                                                                                                                                                                | \$                            |                                            |
|    | Total                                                                                                                                                                                                                                                                                                                                                                                                                                | \$                            | \$                                         |
| 2. | Answer also in Appendix, Column 3, if filing under ULOE.  Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | Number<br>Investors           | Aggregate<br>Dollar Amount<br>of Purchases |
|    | Accredited Investors                                                                                                                                                                                                                                                                                                                                                                                                                 | 86                            | \$ 1,199,540,000                           |
|    | Non-accredited Investors                                                                                                                                                                                                                                                                                                                                                                                                             | 0                             | <u>s</u> 0                                 |
|    | Total (for filings under Rule 504 only)                                                                                                                                                                                                                                                                                                                                                                                              |                               | <u></u>                                    |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.                                                                                                           |                               |                                            |
|    | Type of offering                                                                                                                                                                                                                                                                                                                                                                                                                     | Type of<br>Security           | Dollar Amount<br>Sold                      |
|    | Rule 505                                                                                                                                                                                                                                                                                                                                                                                                                             | N/A                           | \$N/A                                      |
|    | Regulation A                                                                                                                                                                                                                                                                                                                                                                                                                         | N/A                           | \$N/A                                      |
|    | Rule 504                                                                                                                                                                                                                                                                                                                                                                                                                             | N/A                           | \$ N/A                                     |
|    | Total                                                                                                                                                                                                                                                                                                                                                                                                                                | N/A                           | \$ <u>N/A</u>                              |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.                                                |                               |                                            |
|    | Transfer Agent's Fees                                                                                                                                                                                                                                                                                                                                                                                                                |                               | \$0                                        |
|    | Printing and Engraving Costs                                                                                                                                                                                                                                                                                                                                                                                                         | $\boxtimes$                   | \$28,350                                   |
|    | Legal Fees                                                                                                                                                                                                                                                                                                                                                                                                                           | $\boxtimes$                   | \$1,228,500                                |
|    | Accounting Fees                                                                                                                                                                                                                                                                                                                                                                                                                      | $\boxtimes$                   | \$\$22,680                                 |
|    | Engineering Fees                                                                                                                                                                                                                                                                                                                                                                                                                     |                               | \$0                                        |
|    | · · · · · ·                                                                                                                                                                                                                                                                                                                                                                                                                          |                               |                                            |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1 This aggregate offering price applies to the issuer and Oak Hill Capital Management Partners II, L.P., its parallel investment entity. In the aggregate, these two entities may not sell partnership interests in excess of \$2,500,000,000.

|                                                                                                                               |                                                                                                               | E, NUMBER OF INVESTORS, EXPENSES AND                                                                                                                                                                                                                                                                                    | USE OF PROCEEDS                                        |                         |  |  |
|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-------------------------|--|--|
|                                                                                                                               |                                                                                                               | fees separately)                                                                                                                                                                                                                                                                                                        | $\boxtimes$                                            | \$5,670,000             |  |  |
| •                                                                                                                             | ses (identify) (TRAVEL                                                                                        |                                                                                                                                                                                                                                                                                                                         | \$80,325                                               |                         |  |  |
| Total                                                                                                                         |                                                                                                               |                                                                                                                                                                                                                                                                                                                         |                                                        | \$                      |  |  |
| Question 1 and tota "adjusted gross pro  5. Indicate below the each of the purpose check the box to total "adjusted gross pro | al expenses furnished in representations of the adjusted grades shown. If the amount he left of the estimate. | eggregate offering price given in response to Part C esponse to Part C — Question 4.a. This difference is the constant of the issuer used or proposed to be used for any purpose is not known, furnish an estimate and the total of the payments listed must equal the adjuster propose to Part C — Question 4.b above. | or<br>or                                               | \$ <u>1,192,510,145</u> |  |  |
| gross proceeds to                                                                                                             | me issuer set form in rest                                                                                    | onse to Part C — Question 4.0 above.                                                                                                                                                                                                                                                                                    | Payments to<br>Officers,<br>Directors, &<br>Affiliates | Payments to<br>Others   |  |  |
| Salaries and fees                                                                                                             |                                                                                                               |                                                                                                                                                                                                                                                                                                                         | <b>\$</b>                                              | <b>S</b>                |  |  |
| Purchase of real es                                                                                                           | tate                                                                                                          |                                                                                                                                                                                                                                                                                                                         | □ \$                                                   | \$                      |  |  |
| Purchase, rental or                                                                                                           | leasing and installation of                                                                                   | of machinery and equipment                                                                                                                                                                                                                                                                                              | <b>\$</b>                                              | <u> </u>                |  |  |
| Construction or lea                                                                                                           | asing of plant buildings a                                                                                    | nd facilities                                                                                                                                                                                                                                                                                                           | □ \$                                                   | □ \$                    |  |  |
|                                                                                                                               | er businesses (including thange for the assets or se                                                          | □ \$                                                                                                                                                                                                                                                                                                                    | □ s                                                    |                         |  |  |
| Repayment of inde                                                                                                             | btedness                                                                                                      |                                                                                                                                                                                                                                                                                                                         | s                                                      |                         |  |  |
| Working capital                                                                                                               |                                                                                                               | <b>S</b>                                                                                                                                                                                                                                                                                                                | ⊠ \$ <u>1,192,510,145</u>                              |                         |  |  |
| Other (specify):                                                                                                              |                                                                                                               |                                                                                                                                                                                                                                                                                                                         |                                                        |                         |  |  |
|                                                                                                                               |                                                                                                               |                                                                                                                                                                                                                                                                                                                         |                                                        |                         |  |  |
|                                                                                                                               |                                                                                                               | □ <b>\$</b>                                                                                                                                                                                                                                                                                                             | □ <b>\$</b>                                            |                         |  |  |
| Column Totals                                                                                                                 | ,,,,,,                                                                                                        | □ s                                                                                                                                                                                                                                                                                                                     | <b>⊠</b> \$ <u>1,192,510,145</u>                       |                         |  |  |
| Total Payments Lis                                                                                                            | sted (column totals added                                                                                     | l)                                                                                                                                                                                                                                                                                                                      |                                                        | 1,192,510,145           |  |  |
| •                                                                                                                             | `                                                                                                             | ,                                                                                                                                                                                                                                                                                                                       |                                                        |                         |  |  |
|                                                                                                                               |                                                                                                               | D. FEDERAL SIGNATURE                                                                                                                                                                                                                                                                                                    |                                                        | •                       |  |  |
| signature constitutes an ur                                                                                                   | dertaking by the issuer to                                                                                    | by the undersigned duly authorized person. If this not of furnish to the U.S. Securities and Exchange Commisedited investor pursuant to paragraph (b)(2) of Rule 5                                                                                                                                                      | sion, upon written reques                              |                         |  |  |
| Issuer (Print or Type) Oak Hill Capital Partner                                                                               | rs II, L.P.                                                                                                   | Signature M                                                                                                                                                                                                                                                                                                             | Date January 4, 2005                                   |                         |  |  |
| Name of Signer (Print or John R. Monsky                                                                                       | Гуре)                                                                                                         | Title of Signer (Print or Type)  Vice President of OHCP MGP II, LLC, the Ultim                                                                                                                                                                                                                                          | ate General Partner                                    |                         |  |  |
|                                                                                                                               |                                                                                                               |                                                                                                                                                                                                                                                                                                                         |                                                        |                         |  |  |

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)